physiological vehicle which is not particle retentive, the micro particles of the composition further being of a designed average particle size distribution and characterized by a rough surface having a plurality of surface irregularities generally randomly formed therein, such that the combination of average particle size and average particle surface roughness cooperate in an autogenous manner to essentially prevent loss of the micro particles from any injection site, the particles being eventually incorporated for long-term tissue augmentation.

32. A method as defined in claim 31 wherein the composition is injected into a submucosal space selected from the bladder-urethral junction, the esophageal-gastric junction and the gastric-pyloric junction using a plurality of spaced injection sites.

33. A method as defined in claim 31 wherein the micro surface irregularities of the micro particles describe indentations, cavities and pores forming a very irregular surface and openings within the particles, the micro particles having an average unidimensional particle size generally between 30 and 3000 microns with the dimensions of the indentations, cavities and pores within the particles being generally in a range between 10 angstroms and 500 microns.

34. A method as defined in claim 31 wherein the micro particles possess an average unidimensional particle size above 60 microns.

35. A method as defined in claim 31 wherein the micro particles possess an average unidimensional particle size in the range of from about 80 microns to about 600 microns.

36. A method as defined in claim 33 wherein the micro particles comprise a relatively resilient material.

37. A method as defined in claim 36 wherein the resilient material is a polysiloxane and wherein the physiological vehicle comprises polyvinylpyrrolidone.

38. A method as defined in claim 37 wherein the resilient material is polydimethylsiloxane.

39. A method as defined in claim 34 wherein the composition is injected into a submucosal space selected from the bladder-urethral junction, the esophageal-gastric junction and the gastric-pyloric junction using a plurality of spaced injection sites.

40. A method as defined in claim 31 wherein the composition is injected under the intravesical portion of the ureter using a plurality of spaced injections.

41. A method as defined in claim 34 wherein the composition is injected under the intravesical portion of the ureter using a plurality of spaced injections.

42. A method as defined in claim 39 wherein the amount of the composition injected per site is from about 1.0 to about 5.0 cc.

43. A method as defined in claim 40 wherein the amount of the composition injected per site is from about 1.0 to about 5.0 cc.

44. A method for long-term treatment of incontinence comprising the steps of making a plurality of spaced injections into the submucosal layer of the urethra of a composition comprising an amount of biologically compatible micro particles dispersed in a compatible physiological vehicle which is not particle retentive, the micro particles of the composition further being of a designed average unidimensional particle size distribution between 30 and 3000 microns, a rough surface having a plurality of surface irregularities generally randomly formed therein, characterized by indentations, cavities and pores forming openings upon the surface of the particles, with the dimensions of the indentations, cavities and pores being generally in a range between 10 angstroms and 500 microns, such that the combination of average particle size and average particle surface roughness cooperate in an autogenous manner to essentially prevent loss of the micro particles from any injection site, the particles being eventually incorporated for long-term tissue augmentation.

45. A method as defined in claim 44 wherein the micro particles possess an average unidimensional particle size in the range of from about 80 microns to about 600 microns.

46. A method as defined in claim 44 wherein the micro particles comprise a relatively resilient material.

47. A method as defined in claim 46 wherein the resilient material is a polysiloxane and wherein the physiological vehicle comprises a polyvinylpyrrolidone.

48. A method for long-term treatment of gastric reflux comprising the steps of making a plurality of injections at spaced sites into the appropriate submucosal space selected from the esophageal-gastric junction and gastric-pyloric junction a composition comprising an amount of biologically compatible micro particles dispersed in a compatible physiological vehicle which is not particle retentive, the micro particles of the composition further being of a designed average unidimensional particle size distribution between 30 and 3000 microns, a rough surface having a plurality of surface irregularities generally randomly formed therein, characterized by indentations, cavities and pores forming openings upon the surface of the particles, with the dimensions of the indentations, cavities and pores being generally in a range between 10 angstroms and 500 microns, such that the combination of average particle size and average particle surface roughness cooperate in an autogenous manner to essentially prevent loss of the micro particles from any injection site, the particles being eventually incorporated for long-term tissue augmentation.

49. A method is defined in claim 48 wherein the micro particles comprise a relatively resilient polysiloxane material.

50. A method as defined in claim 48 wherein the physiological vehicle comprises a polyvinylpyrrolidone.

51. A method as defined in claim 49 wherein the resilient polysiloxane material is polydimethylsiloxane.